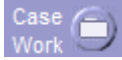
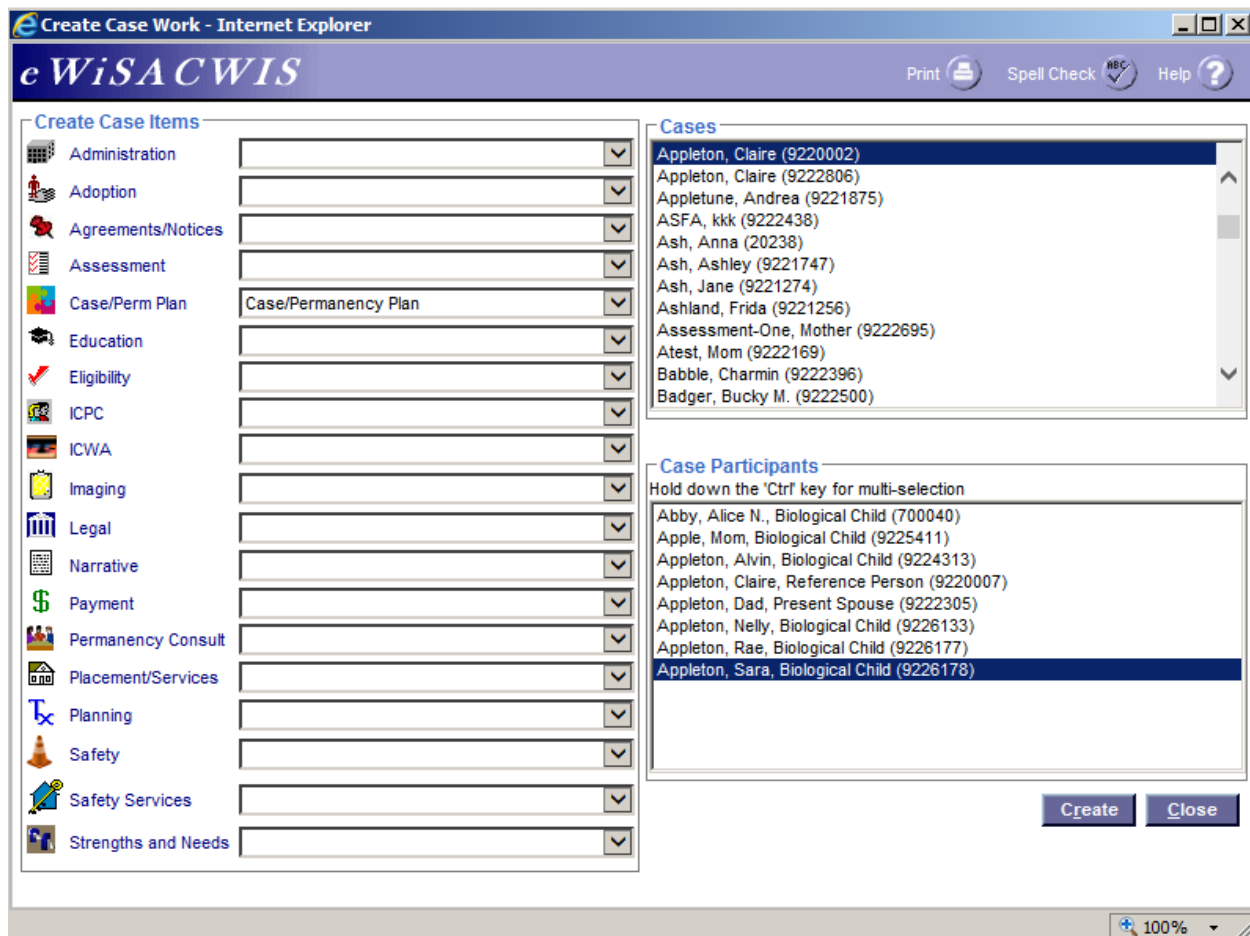


# Permanency Plan

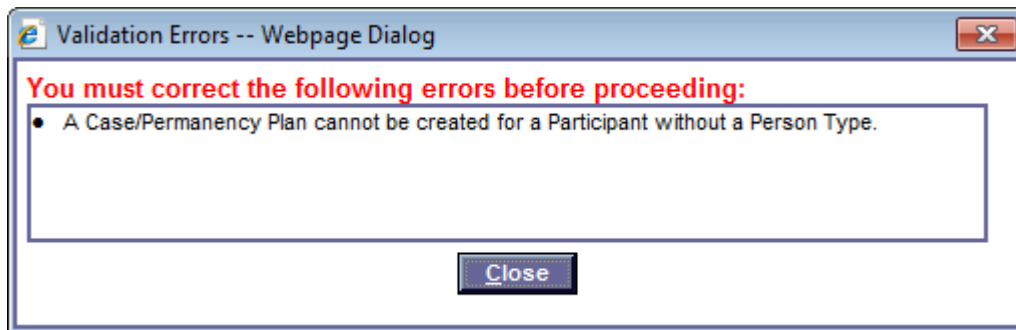
The Permanency Plan has many different aspects and can change when information is updated on the case or person. If the child has an Out of Home Placement (OHP) and there are no safety concerns (the child is safe) on the Safety Assessment, Analysis and Plan, then the Case/Permanency Plan page will not have a Safety tab. For a child in an OHP with a Person Type of CPS then the Safety tab displays. If a Case/Permanency Plan already exists for a child in the case, then you can use the copy function when you create the Permanency Plan.

**Note:** In order to create a Permanency Plan, an assignment to the case is needed.

1. From the desktop, go up to Create > Case Work or click the Case Work hot button . This will open the Create Case Work page.
2. On the Create Case Work page, select Case/Permanency Plan from the Case/Perm Plan icon. Select the family and the case participant. Then click Create.



**Note:** A Person Type is required in order to create a Permanency Plan. See the Person Management User Guide for additional information.



- If a Permanency Plan or Case Plan exists, the Case/Permanency Plan Creation page will appear. Click the [Copy](#) hyperlink to copy an associated Plan. Otherwise, click the Create to create a new Permanency Plan.

Case/Permanency Plan Creation - Windows Internet Explorer

**eWiSACWIS** Print Spell Check Help

Please select a plan to copy from if appropriate

**Existing Case/Permanency Plans**

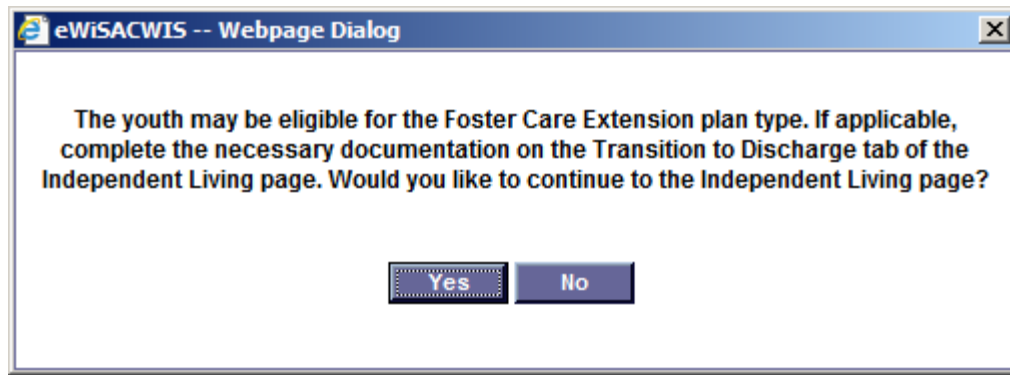
Child	Plan Date ▼	Plan Type	Status	
Multi-Child	10/03/2012	Case Plan	Pending	<a href="#">Copy</a>

Create Close

Done Local intranet | Protected Mode: Off 100%

On the Case/Permanency Plan page, a date will prefill in the Plan Date field based on when the next plan is due. The Plan Date will determine what type of plan displays, based on the child's Person Type.

- Note:** Having a future date on the plan brings in any additional applicable information (Services; Education; Medical/Mental Health; Safety Assessment, Analysis and Plan; and CANS) each time the plan is opened. In order to approve the plan, a future Plan Date is not allowed but upon approval, you will be able to update the Plan Date to the approval date.
- Note:** If the child is over 18 and extending foster care to 21 face to face contact dates related to the parents, as well as the parent/caregiver and family sections will not appear and Plan Type will show EXT. When attempting to create a plan for a child who may be eligible for the extension users will receive the message below. Clicking "Yes" will take the worker to the Independent Living record in order to complete the extension eligibility. (See the Independent Living Guide for more details)



4. The first tab is the Basic tab. In the Court Information group box, click the Add/Edit button to add the court information.

Case / Permanency Plan - Internet Explorer

**eWiSACWIS** TM Print Spell Check ABC Help ?

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/2012 Plan Date:  [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

**Basic** Considerations for Review/Hearing Removal Placement Permanency Well-Being Safety Planning & Services

**Court Information**

Court File Number(s) Branch Judge [Legal Record](#)

[Add/Edit](#)

**Parent Info**

Mother: [Appleton, Claire](#) Father: [Appleton, Dad](#)

Display: ☒ Address: 111222 Penntw on Rd Baraboo, WI 53913 Display: ☒ Address: 225 Learjet Way Eagle River, WI 54521

Phone: (608)888-8888 Phone: (715)222-2222

Cell Phone: Cell Phone:

[Modify](#) Mother's Attorney: [Modify](#) Father is: Father's Attorney:

**Collaterals**

[Modify](#) Guardian ad Litem: Smith, Tanny [Modify](#) Public Defender / Attorney for Child:

[Modify](#) District Attorney / Corporation Other:

[Modify](#) Counsel: Court Appointed Special Advocate:

Options:

150%

**Note:** Select the “Case Notes:” hyperlinks to search Structured Case Notes. See the Creating and Viewing Case Notes/Structured Case Notes User guide for more information.

5. On the Court Information Selection page, select all applicable court numbers. If the appropriate court number is not displayed, click the [Legal Record](#) hyperlink to add the court information to the Legal Record. Once all court numbers have been selected, click the Continue button to return to the Case/Permanency Plan page.

Court Information Selection -- Webpage Dialog

**eWiSACWIS** Print Spell Check Help

**Court Information Selection**

Select all that apply.

Select	Court Number	Branch	Judge	Date
<input type="checkbox"/>	Not Applicable			

[Legal Record](#)

Continue Close

6. In the Parent Info group box, you will see the child's mother and father. To add either of them, click on the Child Name hyperlink at the top of the page and update the Parent Info tab of the child's Person Management page. If any of the information in the Mother or Father section needs updating, click on the associated Mother or Father hyperlink to open the Mother's or Father's Person Management page. Click on the [Modify](#) hyperlink for the mother or father to add the mother's or father's attorney on the Collaterals tab of the Maintain Case page.

**Note:** The Display checkbox is automatically checked. If you uncheck the checkbox then the address information does not display on the Permanency Plan template.

**Note:** If the child has a Legal Guardian(s) or Indian Custodian(s) documented on the Parent Info tab of her Person Management page, the Legal Guardians and/or Indian Custodians group boxes will appear.

7. To update any of the Collaterals, click on the associated [Modify](#) hyperlink in the Collaterals group box. This will open the Collaterals tab on the Maintain Case page. For any other type of collateral besides what is listed in the Collaterals group box, enter information in the Other box.

**eWiSACWIS** TM Print Spell Check Help

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/2012 Plan Date: 02/11/2013 [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

**Basic** Considerations for Review/Hearing Removal Placement Permanency Well-Being Safety Planning & Services

**Court Information**

Court File Number(s) Branch Judge [Legal Record](#)

[Add/Edit](#)

**Parent Info**

Mother: [Appleton, Claire](#) Father: [Appleton, Dad](#)

Display: ☒ Address: 111222 Penntw on Rd Baraboo, WI 53913 Display: ☒ Address: 225 Learjet Way Eagle River, WI 54521

Phone: (608)888-8888 Phone: (715)222-2222

Cell Phone: Cell Phone:

[Modify](#) Mother's Attorney: [Modify](#) Father is: Father's Attorney:

**Collaterals**

[Modify](#) Guardian ad Litem: Smith, Tanny [Modify](#) Public Defender / Attorney for Child:

[Modify](#) District Attorney / Corporation Counsel: Other:

[Modify](#) Court Appointed Special Advocate:

Options:  [Go](#) [Save](#) [Close](#)

8. The second tab is the Considerations for Review/Hearing tab. If the ICWA Considerations is Yes then all the pertinent information displays in this group box. Click the [Modify](#) hyperlink to update the child's race, ethnicity, and tribal information on the Person Management page.
9. Enter text in the narrative boxes in the Other Considerations group box. The Child, Mother, and Father face-to-face contacts will come from the Case Notes page for the most recent face-to-face contacts (Face-to-Face Result must = Occurred). To update the dates, click on the [Create Case Note](#) hyperlink to open the Case Notes page. Enter a date for the Out-of-home care provider last face-to-face contact.

**Note:** The Finalized checkbox on the Case Notes page does not need to be checked in order for the case notes to appear.

The screenshot displays the eWiSACWIS Case Management System interface within an Internet Explorer browser window. The title bar reads "Case / Permanency Plan - Internet Explorer". The application header features the "eWiSACWIS" logo and navigation links for "TM", "Print", "Spell Check", and "Help".

The main content area is divided into two sections. The top section, titled "Basic", contains the following information:

- Child Name: [Appleton, Sara \(9226178\)](#)
- Case Name: [Appleton, Claire \(9220002\)](#)
- Person Type: CPS, CW
- Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)
- Birth Date: 10/01/2012
- Plan Is: Subsequent
- Plan Date: 02/11/2013
- Plan Type: CPS, OHC
- Next Permanency Review /Hearing Due: n/a

A "Details" link is located to the right of the Plan Date. Below this section is a horizontal tab bar with the following tabs: "Basic", "Considerations for Review/Hearing" (selected), "Removal", "Placement", "Permanency", "Well-Being", "Safety", and "Planning & Services".

The "Considerations for Review/Hearing" tab contains two main sections:

- ICWA Considerations**: A section asking "Are there any Indian Child Welfare Act considerations with this child?" with a "No" response and a "Modify" link.
- Other Considerations**: A section with a text area for "Provide a statement as to whether the child's age and developmental level are sufficient for the court or review panel to consult with the child at the hearing or review." Below this is a large text input field with the placeholder "Enter required text here...".

Below the "Other Considerations" section, there are links for "More...", "Less...", and "Default".

The bottom section of the "Other Considerations" tab contains the following information:

- Date of last face-to-face contact: [Empty field]
- Child: [10/06/2012](#)
- Mother: [10/04/2012](#) (Contact By Designee)
- Out-of-home care provider: [00/00/0000](#)
- Father: [10/06/2012](#)
- Relevant information (e.g., location, who was in attendance, any interactions that were notable): [Empty text area]

At the bottom of the form, there is an "Options:" dropdown menu, a "Go" button, and "Save" and "Close" buttons. The browser status bar at the bottom right shows "150%" zoom.

10. The third tab is the Removal tab. Enter text in both of the required narrative boxes in the Removal group box.

**Note:** If the child is Indian, a third narrative box will appear. Enter narrative in the associated box.

Case / Permanency Plan - Internet Explorer

**eWiSACWIS** TM Print Spell Check Help

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/2012 Plan Date: 02/11/2013 [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

**Basic** **Considerations for Review/Hearing** **Removal** **Placement** **Permanency** **Well-Being** **Safety** **Planning & Services**

**Removal**

Explain the basis of the decision to place the child in custody. Include a narrative of the circumstances and why remaining in the home would be contrary to the child's welfare; and the jurisdictional statute used as the basis.

Enter required text here...

[More...](#) [Less...](#) [Default](#)

Identify and describe the actions taken and the services offered or provided by the agency to make reasonable efforts to prevent removal of the child from the home.

Enter required text here...

[More...](#) [Less...](#) [Default](#)

Options: [Dropdown] [Go](#) [Save](#) [Close](#)

150%

11. The fourth tab is the Placement tab. This displays all information related to the child's placement. If you uncheck the Display checkbox then this information (provider's name and address) does not display on the Permanency Plan template. Select the appropriate Educational Stability Consideration for each Out of Home Placement.
12. If your agency's service types indicate "Prefill Templates," then any applicable Services will pre-fill in the Placement Services History group box.

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/2012 Plan Date:  [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

**Placement**

**Placement History**

Date of Removal: 10/04/2012 [View Current Placement](#)

Begin Date	End Date	Placement Type	Out-of-Home Care Provider	Educational Stability Consideration
10/04/2012	Present	Unlicensed-Non-Relative	Feracotta, Lori 123 Mads	

**Placement Services History**

Begin Date	End Date	Service Type	Service Provider
------------	----------	--------------	------------------

**Consideration of Relatives**

☐ Yes ☐ No Is the child placed with a relative? [Relative Search](#)

If the child is **not** placed with a relative, describe why placement was not available, appropriate or safe. Identify which relatives have been sent notification of the child's placement into out-of-home care below.

Options:

13. In the Consideration of Relatives group box, select the Yes or No radio button to indicate if the child is placed with a relative.



14. If no relatives are documented on the Relative/Non-Relative Search Summary page for the child, answer the question, “If a relative could not be located, describe subsequent/current efforts made to locate a relative.” To add any relatives, click on the [Relative Search](#) hyperlink. See the associated Relative/Non-Relative Search User Guide.

**Consideration of Relatives**

☐ Yes ☐ No Is the child placed with a relative? [Relative Search](#)

If the child is **not** placed with a relative, describe why placement was not available, appropriate or safe. Identify which relatives have been sent notification of the child's placement into out-of-home care below.

Relative Contact Information	Relationship to Child	Notification of Placement Sent	Placement Considered	Description of why placement was not available, appropriate or safe.
If a relative could not be located, describe subsequent/current efforts made to locate a relative.				

[More...](#) [Less...](#) [Default](#)

If the Relative/Non-Relative Search Summary page contains any relatives, the relative section will display the relatives. If indicated ‘Yes’ the child is placed with a relative, at least one relative must be documented on relative search.

**Note:** Non-Relatives will only display here if a Notification of Placement was sent to that non-relative.

**Note:** Any Relative Search records that were created when they were copied over from another child when the Notification of Placement was created, will need to have the relationship and placement consideration section completed before the plan can be approved.

**Consideration of Relatives**

☒ Yes ☐ No Is the child placed with a relative? [Relative Search](#)

If the child is **not** placed with a relative, describe why placement was not available, appropriate or safe. Identify which relatives have been sent notification of the child's placement into out-of-home care below.

Relative/Non-Relative Contact Information	Relationship to Child	Notification of Placement Sent	Placement Considered	Description of why placement was not available, appropriate or safe.
Appleton, Grandma 321 State Street Madison, WI 53701	great grandparent	10/05/2012	Yes	Description here...
Badger, Bucky 123 Camp Randall Avenue Madison, WI 53701	uncle	10/05/2012	Yes	Description here...
Badger, Lady 123 Camp Randall Avenue Madison, WI 53701	aunt	10/05/2012	Yes	Description here....

15. In the Consideration of Siblings group box, select the appropriate radio button.

#### Consideration of Siblings

Are all siblings that are in OHC placed together?

- ☐ Does not apply. Child has no siblings or other siblings are not in placement.
- ☐ Yes
- ☐ No, explain:

16. In the Location of Placement group box, select the appropriate radio button. If the “No setting is available...” radio button is selected, enter narrative in the associated box.

#### Location of Placement

- ☐ The child's placement is within 60 miles of the child's home and is in close proximity so as not to interfere with carrying out the permanency plan and maintaining the level of contact with the parents that is deemed appropriate.
- ☐ No setting is available within 60 miles of the child's home that could respond to all the issues and needs that are part of this placement.
- Describe: - Why a placement within 60 miles of the child's home is either unavailable or inappropriate; OR  
- Why a placement more than 60 miles from the child's home is in the child's best interest.

[More...](#) [Less...](#) [Default](#)

17. In the Reasonable and Prudent Parenting Considerations group box, select the appropriate radio button. If the “Yes” radio button is selected, enter narrative in the associated box.

#### Reasonable and Prudent Parenting Considerations

- ☒ Yes ☐ No Did the agency provide information to the out-of-home care provider for consideration in making reasonable and prudent parenting decisions specific to the child?

Describe the efforts made by the agency to ensure that the child has regular, ongoing opportunities to engage in age or developmentally appropriate activities determined in accordance with the reasonable and prudent parent standard in the out-of-home care placement which includes consulting with the child in an age appropriate manner: [Details](#)

Describe...

[More...](#) [Less...](#) [Default](#)

If the “No” radio button is selected, enter narrative in the associated boxes.

#### Reasonable and Prudent Parenting Considerations

☐ Yes ☒ No Did the agency provide information to the out-of-home care provider for consideration in making reasonable and prudent parenting decisions specific to the child?

Explain:

Explain...

[More...](#) [Less...](#) [Default](#)

Describe the efforts made by the agency to ensure that the child has regular, ongoing opportunities to engage in age or developmentally appropriate activities determined in accordance with the reasonable and prudent parent standard in the out-of-home care placement which includes consulting with the child in an age appropriate manner: [Details](#)

Describe...

[More...](#) [Less...](#) [Default](#)

18. In the Placement Changes group box, select the Yes or No button for each of the questions. If the court ordered a transitional change or the agency anticipates a placement change, click on the [Search](#) hyperlink and search out the upcoming provider. The name and address of the new placement will pre-fill to the plan. Enter text in the associated narrative field.

#### Placement Changes

Did the court order indicate a transitional placement?

☒ Yes

☐ No

Name of the New Placement: Badger, Bucky

[Search](#)

Address of the New Placement: 123 Camp Randall Avenue, Madison, WI 53701

If yes, describe in detail including anticipated date of the placement change:

Describing here...

[More...](#) [Less...](#) [Default](#)

Does the agency anticipate a placement change?

☒ Yes

☐ No

Name of the New Placement: Badger, Bucky

[Search](#)

Address of the New Placement: 123 Camp Randall Avenue, Madison, WI 53701

If yes, describe in detail including anticipated date of the placement change:

Describing here...

[More...](#) [Less...](#) [Default](#)

19. In the Annual Credit Report group box, select the Yes or No button for each of the questions. Click the [Imaging Search](#) hyperlink to attach an image. If the child is under 16 years of age, only the second question will be displayed. If the child is older than 16, both the questions below will be displayed. Additionally, there is an optional narrative box to enter comments, if any.

**Annual Credit Report**

☐ Yes ☐ No Were there any inaccuracies in this report? [Imaging Search](#)

Explain:

[More...](#) [Less...](#) [Default](#)

20. In the Confirming/Reconfirming Safe Environments group box, information from the most recent Confirming/Reconfirming Safe Environments (CSE/RCSE) will pre-fill. If the CSE/RCSE does not exist, click on the [Create CSE/RCSE](#) hyperlink. See the associated Confirming Safe Environments or Reconfirming Safe Environments User Guides for additional information.

**Note:** If the CSE/RCSE is pending, the hyperlink will read “[Modify CSE/RCSE](#).” If the CSE/RCSE is approved, the hyperlink will read “[View CSE/RCSE](#).”

**Note:** There must be an associated approved CSE/RCSE within the past 6 months in order to approve the Permanency Plan.

**Confirming/Reconfirming Safe Environments**

Date of CANS: Child's Assessed Level of Need (LON): Provider's Level of Care (LOC): [Create CSE/RCSE](#)

Child/Provider Match: [View CSE/RCSE](#)

Describe:

**Placement Danger Threats:**

No present danger threats.

The court continued placement despite an identified Placement Danger Threat. N/A

21. The fifth tab is the Permanency tab. In the Determination of Appropriateness for Concurrent Planning group box, select the Yes or No radio button next to each question. Depending upon how the questions are answered, the agency's determination of whether to engage in concurrent planning will indicate whether current planning is needed. Answer the question, "Despite the agency's determination to engage in concurrent planning, has the court determined that having a concurrent permanency goal is not appropriate?" If Yes is selected, enter the Date.

Case / Permanency Plan - Internet Explorer

**eWiSACWIS** TM Print Spell Check Help

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/2012 Plan Date:  [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

Basic	Considerations for Review/Hearing	Removal	Placement	<b>Permanency</b>	Well-Being	Safety	Planning & Services
<p><b>Determination of Appropriateness for Concurrent Planning</b></p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No The child has been the victim of more than one form of abuse.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No There have been 3 or more CPS interventions for serious separate incidents, indicating a chronic pattern of abuse or severe neglect or there is a pattern of intergenerational abuse with a lack of historical change in family dynamics.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No A parent has a history of substance abuse or is chemically dependent and/or has a history of treatment failures or the child was drug-exposed at the time of birth.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No The child has been abandoned with friends, relatives, out-of-home care providers, hospital, or after being placed in care, parents do not visit on their own accord. Parents disappear or appear rarely.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No A parent is intellectually impaired, or has shown significant deficits in care for the child and has no support system of relatives able to share parenting.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No Parents or caretakers have a pattern of at least one year of documented history of domestic violence between caretakers and they refuse to separate.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No A parent's rights to another child have been involuntarily terminated or the parent has asked to relinquish the child on more than one occasion.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No A parent has significant, protracted, and untreated mental health issues.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No The child or siblings have been placed in out-of-home care or with relatives for periods of over six months duration or have had repeated placements with CPS intervention and previous attempts at reunification have failed.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No A parent's only visible support system is a drug culture, with no significant effort to change over time.</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No A parent has repeatedly and with premeditation harmed a child or the child experienced extreme physical or sexual abuse by a parent or the parent has allowed someone else to abuse the child.</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No A parent has previously killed or seriously harmed another child.</p> <p>The agency's determination of whether to engage in concurrent planning indicates</p>							

Options:

22. If this is a Subsequent plan, select the Permanence Goal from the drop-down in the Current Permanence Goal of Record group box. If applicable, select the Concurrent Goal.

**Note:** If the plan is the Original plan, there will be only a Proposed Permanence Goals group box.

In the Permanence Goal and Concurrent Goal group boxes, the set of questions will vary, depending upon which goal was selected in the Current Permanence Goal of Record group box. Document a response to each of the questions. If applicable, select the appropriate radio button for the question(s).

23. In the Proposed Permanence Goals group box, select the Permanence Goal from the drop-down and document the anticipated date the permanence goal will be achieved. Describe the rationale for the child's goal(s).

### View if Original:

<b>Proposed Permanence Goals</b>	
Child's proposed permanence and, if applicable, concurrent permanence goal of record.	
Permanence Goal:	<input type="text"/> Anticipated date the permanence goal will be achieved: <input type="text" value="00/00/0000"/>
Concurrent Goal:	<input type="text"/>
<b>Permanence Goal</b>	
Permanence Goal:	
<b>Concurrent Goal</b>	
Concurrent Goal:	

### View if Subsequent:

<b>Current Permanence Goal of Record</b>	
Child's current permanence and, if applicable, concurrent permanence goal of record.	
Permanence Goal:	<input type="text"/>
Concurrent Goal:	<input type="text"/>
<b>Permanence Goal</b>	
Permanence Goal:	
<b>Concurrent Goal</b>	
Concurrent Goal:	
<b>Proposed Permanence Goals</b>	
Child's proposed permanence and, if applicable, concurrent permanence goal of record.	
Permanence Goal:	<input type="text"/> Anticipated date the permanence goal will be achieved: <input type="text" value="00/00/0000"/>
Concurrent Goal:	<input type="text"/>
Describe rationale for the child's goal(s):	
<input type="text"/>	
<a href="#">More...</a> <a href="#">Less...</a> <a href="#">Default</a>	

24. Select the radio button for the question in the Reasonable Efforts group box. If Yes, enter the date of the court finding.

**Reasonable Efforts**

☐ Yes ☒ No Has the court made a finding that reasonable efforts to prevent removal or safely return to home are not required?

Date of court finding:

25. If a Termination of Parental Rights (TPR) has occurred, the date referred to District Attorney/Corporation Counsel and the date TPR filed will appear. You can create a Legal Record from the [Create Legal Record](#) hyperlink if the TPR does not exist.

**Termination of Parental Rights**

Date referred to District Attorney/Corporation Counsel office: \_\_\_\_\_ Date TPR Filed: \_\_\_\_\_ [Create Legal Record](#)

26. The ASFA Exceptions group box pre-fills if there is an ASFA Exceptions of why TPR was not being pursued at 15 of 22 months. You can create an ASFA Exception from the [Create ASFA Exceptions](#) hyperlink if it does not exist. See the associated ASFA Exceptions User Guide to create an ASFA Exceptions.

**Note:** This is a point in time determination that is made by the agency and should not be modified once established, even if circumstances have changed.

**ASFA Exceptions**

Adoption Safe Families Act Exceptions: State the reason why TPR is not being pursued at 15 of 22 months. This is a point in time determination made by the agency and shall not be modified once established. This exception does not prohibit the agency from pursuing a TPR at a later date, if it is deemed in the child's best interests.

Date of ASFA Exception: \_\_\_\_\_ [Create ASFA Exceptions](#)

☐ Child is placed with a fit and willing relative.  
▶ Provide supporting information:

☐ Compelling reason(s) why termination of parental rights is not in the child's best interest.  
▶ Provide supporting information:

☐ Reasonable efforts to safely return the child to his or her home have not been made.  
▶ Provide supporting information:

☐ Grounds for involuntary TPR do not exist.  
▶ Provide supporting information:

27. The Permanency Review and Permanency Hearing group boxes will pre-fill information from the Permanency Review or Hearing Results page. If this is the original Permanency Plan, the dates will display as N/A.

**Permanency Review**

Date of the latest Permanency Review: N/A

**Permanency Hearing**

Date of the latest Permanency Hearing: N/A

28. The sixth tab is the Well-Being tab. All information in the Child's Health Summary, Medication, and Current Health Care Providers group boxes pre-fills from the Person Management page. Click on the [Modify](#) hyperlink to update the associated information.

**Note:** Use the 'Go To' links to jump to that specific section of the Well-Bing tab.

Case / Permanency Plan - Internet Explorer

**eWiSACWIS** TM Print Spell Check Help ?

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/2012 Plan Date: 02/11/2013 [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

**Basic** Considerations for Review/Hearing Removal Placement Permanency **Well-Being** Safety Planning & Services

**Go To**

[Health Summary](#) [Medication](#) [Health Care Providers](#) [Immunizations](#) [Education](#) [Family Interaction Plan](#) [IL Services](#)

**Child's Health Summary**

☐ Child has chronic physical, mental or emotional issues. [Modify](#)

☐ Child has had a hospitalization, surgery, emergency medical need, or significant illness in the last six months. [Modify](#)

**Medication**

Is the child prescribed medication? No [Modify](#)

Name of Medication	Dosage/Frequency	Psychotropic	Reason Medication is Prescribed	Length Prescribed	Physician/Address

**Current Health Care Providers**

Physician: [Modify](#)

Address:

Telephone:

Date of last exam:

Dentist:

Address:

Options:

29. If Immunization Information is not entered a narrative box displays to enter the reason why they are not up to date. Click on the [Modify](#) hyperlink to update the immunization information.

**Immunization Information**

Child's immunizations are up-to-date. No [Modify](#)

If "No" describe why immunizations are not up-to-date and how and when this will be rectified.

[More...](#) [Less...](#) [Default](#)

A request for the child's immunization was made to on

Immunization	Date(s) Administered



30. The Educational Summary group box displays all education information. Answer the question, “Is the most recent grade report attached?” If you select No, then document who and when the request for records was made to.

All other information from this group box will pre-fill from the Education tab on Person Management. Click the [Modify](#) hyperlink to update the education information.

**Educational Summary**

☐ Yes ☒ No ☐ N/A Is the most recent grade report attached? [Modify](#)

If "No," a request for school records was made to:  Date Requested:

<input type="checkbox"/> School district has been notified of child's placement (if age two or older).	<input checked="" type="checkbox"/> Child is less than age five and does not attend early education or day care.
<input type="checkbox"/> Child is less than age five and attends child care that is not early education, pre-school or 4K.	<input type="checkbox"/> Child is in early intervention program.
<input type="checkbox"/> Child is in pre-school.	<input type="checkbox"/> Child is in kindergarten.
<input type="checkbox"/> Child is in regular education.	<input type="checkbox"/> Child is in special education.
<input type="checkbox"/> Child is in day treatment.	<input type="checkbox"/> Child has an individualized education plan.
<input type="checkbox"/> Child is of school age but is not attending school. Provide explanation.	<input type="checkbox"/> Child was attending school but is currently listed as missing from out-of-home care placement.

Provide name and address of current school or special education providers.

Describe current academic performance. Include grade level, special achievements and current educational difficulty(s). Indicate the date and source of your information.

Current or most recent grade level:  
Is this grade level where the child should be (do not include a child who voluntarily begins kindergarten at age 6)?

31. In the Visitation/Family Interaction Plan group box, information from the associated Family Interaction Plan will pre-fill. If the Family Interaction Plan does not exist, click on the [Create Family Interaction Plan](#) hyperlink. See the associated Family Interaction Plan User Guide for additional information.

**Note:** If the Family Interaction Plan is pending, the hyperlink will read “[Modify Family Interaction Plan](#).” If the Family Interaction Plan is approved, the hyperlink will read “[View Family Interaction Plan](#).”

**Note:** There must be an approved associated Family Interaction Plan in order to approve the Permanency Plan.

**Visitation/Family Interaction Plan**  
Describe the family interaction plan. [Modify Family Interaction Plan](#)  
Parent/Caregiver 1: Claire Appleton  
Minimum Level Required: Supervised Frequency: Enter required text here...  
Supervised By: Department or contracted provider  
Last Restrictive Location Permissible: Family Home  
Parent/Caregiver 2: N/A  
When siblings are not seeing each other as part of the family interaction plan, a sibling interaction plan is necessary. Describe how, when and at what frequency sibling interactions will occur.  

Enter required text here...

  
[More...](#) [Less...](#) [Default](#)

**Note:** If the Person Type for the child does not include CPS, then the eWiSACWIS version of the Family Interaction Plan is not required. If applicable, select the Non-eWiSACWIS Family Interaction Plan radio button and describe the family interaction plan.

**Visitation/Family Interaction Plan**  
☐ eWiSACWIS Family Interaction Plan ☒ Non-eWiSACWIS Family Interaction Plan  
  
[More...](#) [Less...](#) [Default](#)

32. In the Independent Living (IL) Services group box, you can maintain the services by selecting the [Maintain IL Services](#) hyperlink.

**Independent Living (IL) Services**  
A youth is eligible for Independent Living Services when in Out-of-Home Care for six months after age of 14. [Maintain IL Services](#)  
Youth is: ☐ Eligible ☒ Not Eligible

33. The Independent Living Transition to Discharge group box will display once the youth has reached 17 ½ years old. This information pre-fills from the Independent Living page and can be updated by selecting the [Transition to Discharge](#) hyperlink.

Independent Living Transition to Discharge

Transition Planning

ILTD Plan Completed:

ILTD Plan Updated:

Date of Youth's Anticipated Discharge:

Anticipated Age at Discharge:

Date of follow-up appointment following discharge:

Desired method of contact following discharge:

Transition to Discharge

Housing

Goal: Safe and secure living environment upon leaving care.

Anticipated location youth will transition to:

Address Youth Will Transition To:

Housing Resource:

Telephone Number at Housing Resource:

Description of Activities to Achieve Goal:

Provider / Responsible Person:

Date to be Completed:

Goal Achieved:

Date Goal Achieved:

34. The seventh tab is Safety (this tab will only display if the Person Type is CPS). From this tab, you can select the [Create Safety Assessment, Analysis and Plan](#) hyperlink to create a Safety Assessment, Analysis Plan.

**Note:** When the Person Type is CPS, there must be an approved associated Safety Assessment, Analysis Plan in order to approve the Permanency Plan.

Case / Permanency Plan - Internet Explorer

eWiSACWIS

TM

Print

Spell Check

Help

Basic

Child Name: [Appleton, Sara \(9226178\)](#)

Birth Date: 10/01/2012

Plan Date: 02/11/2013

Details

Case Name: [Appleton, Claire \(9220002\)](#)

Plan Is: Subsequent

Next Permanency Review /Hearing Due: n/a

Person Type: CPS, CW

Plan Type: CPS, OHC

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

Basic

Considerations for Review/Hearing

Removal

Placement

Permanency

Well-Being

Safety

Planning & Services

Safety Analysis

An In-Home Safety Plan is necessary to ensure safety of the child(ren) and control threats which would otherwise result in imminent risk of placement. Yes

[Create Safety Assessment, Analysis and Plan](#)  
[View Safety Assessment, Analysis and Plan](#)

Safety Services

The identified Safety Threat; Diminished Protective Capacity; and the associated Safety Services / Action Type, Safety Service Provider and the specific explanation of the safety service / action and how it will control the threat identified and listed below :

Identified Safety Threat: One or both parents/caregivers lack parenting knowledge, skills, or motivation necessary to assure the child's basic needs are met.

Description:

Enter required text here...

More... Less... Default

Safety Service / Action Type: Emergency Medical Care

Safety Service Provider: Responsible Person Here...

Describe here...

Describe the availability, accessibility

Row 1 of 1

Options:

Go

Save

Close

If Safety Services exist, select the Type of Diminished Protective Capacity, this will automatically launch the Diminished Protective Capacity Values page. The [Values](#) hyperlink can be used to return to the Diminished Protective Capacity Values page.

On the Diminished Protective Capacity Values page, select all applicable values. Click Continue to return to the Case/Permanency Plan page.

Document the Demonstrated Behavioral Change needed for safe case closure.

35. In the Safety Decision group box, select the applicable checkboxes.

36. The last tab is the Planning & Services tab. By default this tab displays goals and services which were provided in the last 6 months or will be provided in the next 6 months. The 'Show' dropdown in the Goals & Services Displayed group box can be used to filter which Goals & Services display on the page. Also checking the Display History check box will display goals and services that have ended over 6 months ago.

The Child group box will pre-fill information from the most recent pending or approved Assessment, if applicable. Enter the child's general functioning information. Click Insert in the Child Goals & Services group box to add child goals and services. This will open the Goals and Services page. Click Import to copy goals and/or services from another plan on the case. This will open the Goals and Services Summary page. See step 46 on page 26 for the import feature.

**Note:** The text highlighted in yellow displays the number of actionable items from CANS that need to be addressed.

Case / Permanency Plan - Internet Explorer

**eWiSACWIS** TM Print Spell Check Help ?

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/2012 Plan Date: 02/11/2013 [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

**Basic** **Considerations for Review/Hearing** **Removal** **Placement** **Permanency** **Well-Being** **Safety** **Planning & Services**

**Goals & Services Displayed**

Show: All Goals & Services Display History Start Date: 08/11/2012

**Child**

Identify and describe the court ordered conditions, the actions taken and the services offered or provided by the agency in the previous six months and those to be provided in the next six months to make reasonable efforts, or active efforts in the case of an Indian child to achieve the goal(s) of the Case/Permanency Plan, including services that were recommended or considered but were not available.

Describe the child's general functioning:

Describe...

[More...](#) [Less...](#) [Default](#)

**Child Goals & Services**

0 of 5 actionable items have been considered.

All actionable items must be addressed for the child via one or more services.

Condition/Objective:	<a href="#">Edit</a>
condition/objective here...	<a href="#">Delete</a>
Goal:	

Options: Go Save Close

37. On the Goals and Services page (accessed via the Insert button on the Planning & Services tab of the Case/Permanency Plan page), enter a condition/objective and describe the goal. In the Services group box, select the Service Category and explain the service. In the Responsible Person/Provider section, select the Provider, Medical/Mental Health Provider, Case Participant/Collateral or Worker radio button. Then click the [Search](#) hyperlink and search for the appropriate responsible person/provider. Enter the Frequency/Duration and Begin Date. If applicable, document the End Date. Click on the [Add/Edit](#) hyperlink next to the Actionable Items from CANS. This will open the Actionable Items page.

**Goals and Services -- Webpage Dialog**

**eWiSACWIS** Print Spell Check Help

**Condition / Objective**  
Child: Appleton, Sara  
Condition/Objective:  
condition/objective here...  
[More...](#) [Less...](#) [Default](#)

**Goal**  
Describe goal here... **Goal 1 of 1**  
Goal: [Delete](#)

**Services**  
Service Category: Respite [Delete](#) Service 1 of 1  
Specifically Explain Service: service described...  
Responsible Person/Provider: ☒ Provider ☐ Medical/Mental Health Provider ☐ Case Participant/Collateral ☐ Worker [Search](#)  
Name: Nancy Gaston  
Frequency/Duration: 3 Hours per Week  
Begin Date: 10/11/2012 End Date: 00/00/0000  
Actionable Items from CANS: [Add/Edit](#)  
description of progress  
[Insert Service](#)  
[Insert Goal](#)  
[Save](#) [Close](#)

38. On the Actionable Items page, select all applicable actionable items that relate to the service. Then click Continue to return to the Case/Permanency Plan page.

**Note:** This page will display all actionable items from the child's most recent CANS. Each of the items with an asterisk must be addressed with one or more service. All actionable items for the child (excludes the actionable items for the current caregiver and primary identified permanent resource) must be addressed/considered in order to approve the Permanency Plan.

Actionable Items -- Webpage Dialog

eWiSACWIS

Print
Spell Check
Help

Actionable Items

All Actionable Items designated with an asterisk (\*) must be marked as "Considered" via one or more services prior to approval of the Case/Permanency Plan.

Child/Youth

Considered	Select	Actionable Item	Score	Child Name
<input type="checkbox"/>	<input type="checkbox"/> *	Substance Exposure (lifetime) (Child/Youth Needs - Child Risk Factors)	2	Appleton, Sara
<input type="checkbox"/>	<input type="checkbox"/> *	Physical Abuse (lifetime) (Child/Youth Needs - Trauma)	1	Appleton, Sara
<input type="checkbox"/>	<input type="checkbox"/> *	Neglect (lifetime) (Child/Youth Needs - Trauma)	1	Appleton, Sara
<input type="checkbox"/>	<input type="checkbox"/> *	Medical Trauma (lifetime) (Child/Youth Needs - Trauma)	1	Appleton, Sara
<input type="checkbox"/>	<input type="checkbox"/> *	Labor and Delivery (lifetime) (Child/Youth Needs - Child Risk Factors)	1	Appleton, Sara

Current Caregiver

Considered	Select	Actionable Item	Score	Child Name
<input type="checkbox"/>	<input type="checkbox"/>	Social Resources (Current Caregiver - Current Caregiver Strengths & Needs)	2	Appleton, Sara
<input type="checkbox"/>	<input type="checkbox"/>	Family Stress (Current Caregiver - Current Caregiver Strengths & Needs)	2	Appleton, Sara

Continue
Close

39. Describe the progress, select the status of the service, and document the description of the status. Click the Insert Service or Insert Goal buttons to add additional services or goals to this condition/objective. Click Save and Close to return to the Case/Permanency Plan page.

40. On the Planning & Services tab, the Parents/Caregivers group box will pre-fill information from the most recent pending or approved Assessment. This narrative box is enabled to enter additional information.



41. In the Parents/Caregivers Goals & Services group box, select the Insert button to add goals for the parents/caregiver. This will open the Goals and Services page.

**Parents/Caregivers Goals & Services**

Condition/Objective: Enter required text here...		<a href="#">Edit</a> <a href="#">Delete</a>	
Goal: Enter required text here...			
Participant(s)	Responsible Person / Provider	Begin Date	End Date
Appleton, Claire	Caitlin M Cake	10/04/2012	
Service Category	Specifically Explain Service	Status of Service	
Housing Assistance	Enter required text here...	New: New service will begin in the next six months:	

[Insert](#) [Import](#)

42. On the Goals and Services page, click the [Add/Edit](#) hyperlink to add the parents/caregivers these goals and services are associated to.

**Goals and Services -- Webpage Dialog**

*eWiSACWIS* [Print](#) [Spell Check](#) [Help](#)

**Condition / Objective**  
Parent/Caregiver: [Add/Edit](#)  
Condition/Objective:  
  
[More...](#) [Less...](#) [Default](#)

**Goal**  
Describe Goal:  [Delete](#) Goal 1 of 1

**Services**  
Service Category:  [Delete](#) Service 1 of 1  
Specifically Explain Service:   
Responsible Person/Provider: ☒ Provider ☐ Medical/Mental Health Provider ☐ Case Participant/Collateral ☐ Worker [Search](#)  
Name:   
Frequency/Duration:    
Begin Date:  End Date:   
Describe Progress:   
Status of Service:  [Insert Service](#)

[Insert Goal](#)

[Save](#) [Close](#)

43. On the Case Participants page, select the applicable parents/caregivers. Click Continue to return to the Goals and Services page.

The screenshot shows a web browser window titled "Case Participants -- Webpage Dialog" with the eWiSACWIS logo. The page has a header with "Print", "Spell Check", and "Help" links. The main content area is titled "Case Participants" and contains a table with columns "Select All", "Name", and "DOB".

<input type="checkbox"/> Select All	Name	DOB
<input type="checkbox"/>	Appleton, Alvin	01/09/2009
<input checked="" type="checkbox"/>	Appleton, Claire	10/10/1956
<input checked="" type="checkbox"/>	Appleton, Dad	10/29/1956
<input type="checkbox"/>	Appleton, Nelly	05/01/2012
<input type="checkbox"/>	Appleton, Rae	10/03/2011

At the bottom right of the dialog are "Continue" and "Close" buttons.

44. On the Goals and Services page, enter a condition/objective and describe the goal. In the Services group box, select the Service Category and explain the service. In the Responsible Person/Provider section, select either the Provider, Medical/Mental Health Provider, Case Participant/Collateral or Worker radio button. Then click the [Search](#) hyperlink and search for the appropriate responsible person/provider. Enter the Frequency/Duration and Begin Date. If applicable, document the End Date. Describe the progress, select the status of the service, and document the description of the status. Click the Insert Service or Insert Goal buttons to add additional services or goals to this condition/objective. Click Save and Close to return to the Case/Permanency Plan page.

The screenshot shows a web browser window titled "Goals and Services -- Webpage Dialog" with the eWiSACWIS logo. The page has a header with "Print", "Spell Check", and "Help" links. The main content area is titled "Condition / Objective" and contains a text box for "Condition/Objective: condition/objective for parents/caregivers". Below this are links for "More...", "Less...", and "Default".

The "Goal" section contains a text box for "Describe Goal: parents/caregivers goal" and a "Goal 1 of 1" label with a "Delete" link.

The "Services" section contains a "Service Category" dropdown menu set to "AODA Treatment", a "Delete" link, and "Service 1 of 1". Below this is a text box for "Specifically Explain Service: service for parents/caregivers explained...".

The "Responsible Person/Provider" section contains radio buttons for "Provider", "Medical/Mental Health Provider", "Case Participant/Collateral", and "Worker". The "Provider" radio button is selected. Below this is a text box for "Name: AAA Agency" and a "Search" link.

The "Frequency/Duration" section contains a text box for "Frequency/Duration: 10" and a dropdown menu for "Hours per Week".

The "Begin Date" section contains a text box for "Begin Date: 10/04/2012" and a text box for "End Date: 00/00/0000".

The "Describe Progress" section contains a text box for "Describe Progress: progress....".

The "Status of Service" section contains a dropdown menu for "Status of Service: New: New service will begin in the next six months." and an "Insert Service" button.

At the bottom right of the dialog are "Insert Goal", "Save", and "Close" buttons.

45. In the Family group box, the narrative pre-fills the family's general functioning from the most recent pending or approved Assessment, if applicable. In the Family Goals & Services group box, select the Insert button to add goals and services for the family. This will open the Goals and Services page.

**Family**

Describe the family's general functioning, strengths and current stresses. Consider the family's cultural context.

[More...](#) [Less...](#) [Default](#)

46. On the Goals and Services page, enter a condition/objective and describe the goal. In the Services group box, select the Service Category and explain the service. In the Responsible Person/Provider section, select either the Provider, Medical/Mental Health Provider, Case Participant/Collateral or Worker radio button. Then click the [Search](#) hyperlink and search for the appropriate responsible person/provider. Enter the Frequency/Duration and Begin Date. If applicable, document the End Date. Describe the progress, select the status of the service, and document the description of the status. Click the Insert Service or Insert Goal buttons to add additional services or goals to this condition/objective. Click Save and Close to return to the Case/Permanency Plan page.

**Goals and Services -- Webpage Dialog**

*eWiSACWIS* UAT Resource

**Condition / Objective**

Family:  
Condition/Objective:  
family condition/objective

[More...](#) [Less...](#) [Default](#)

**Goal**

Describe Goal: family goal Goal 1 of 1 [Delete](#)

**Services**

Service Category: Case Management Services [Delete](#) Service 1 of 1

Specifically Explain Service: explanation of services

Responsible Person/Provider: ☐ Provider ☐ Medical/Mental Health Provider ☐ Case Part./Collateral ☒ Worker [Search](#)

Frequency/Duration: 5 Days per Week


Begin Date: 10/01/2014 End Date: 00/00/0000

Describe Progress: describe...

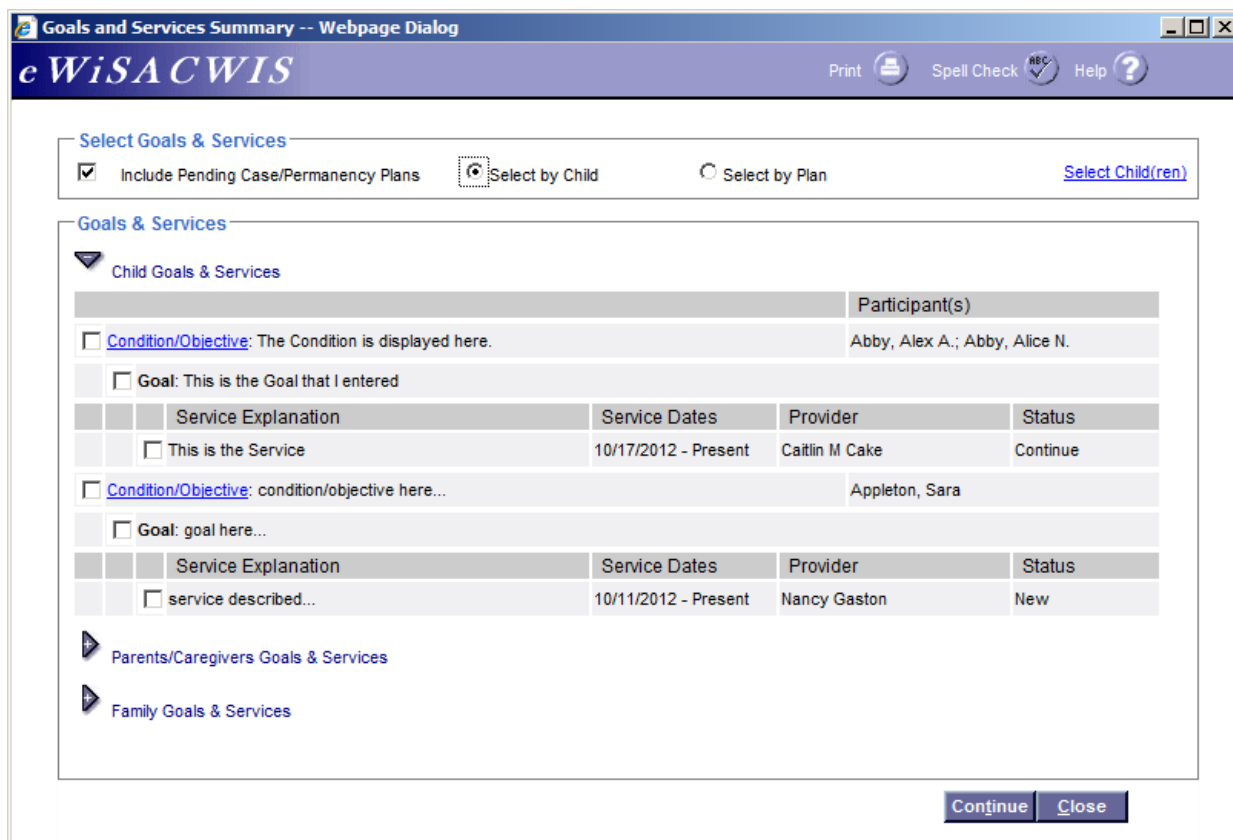
Status of Service: New: New service will begin in the next six months: [Insert Service](#)

[Insert Goal](#)

[Save](#) [Close](#)

47. As noted above, clicking the Import button under the Child Goals & Services, Parents/Caregiver Goals & Services, or Family Goals & Services brings up the Goals and Services Summary page. This page is used to copy goals from other Case/Permanency Plans on the case. By default, the Goals and Services Summary page will display expanded for whichever section [Child, Parents/Caregiver, or Family] that the Import button was clicked under, click the  button to expand the other sections.

The Select Goals & Services group box is used to filter which plans the goals and services on this page will come from. Unchecking Include Pending Case/ Permanency Plans will hide any plan in a pending status.




**Goals and Services Summary -- Webpage Dialog**


**Select Goals & Services**


☒ Include Pending Case/Permanency Plans    ☒ Select by Child    ☐ Select by Plan    [Select Child\(ren\)](#)

**Goals & Services**

 **Child Goals & Services**

		Participant(s)
<input type="checkbox"/> Condition/Objective:	The Condition is displayed here.	Abby, Alex A.; Abby, Alice N.
<input type="checkbox"/> Goal:	This is the Goal that I entered	
<input type="checkbox"/> This is the Service	Service Explanation	Service Dates    Provider    Status
		10/17/2012 - Present    Caitlin M Cake    Continue
<input type="checkbox"/> Condition/Objective:	condition/objective here...	Appleton, Sara
<input type="checkbox"/> Goal:	goal here...	
<input type="checkbox"/> service described...	Service Explanation	Service Dates    Provider    Status
		10/11/2012 - Present    Nancy Gaston    New

 Parents/Caregivers Goals & Services

 Family Goals & Services

[Continue](#) [Close](#)

By default, all children in the case will be selected (the Select by Child radio button is selected). Click the [Select Child\(ren\)](#) hyperlink to bring up the Child Selection page to select a specific child's plan.



**Child Selection -- Webpage Dialog**

**Child(ren)**

☒ Select All

Person Name	DOB	Plan Type
Abby, Alice N.	08/05/1999	Case Plan
Appleton, Sara	10/01/2012	Permanency Plan

[Continue](#) [Close](#)

Select the Select by Plan radio button to bring up the Plan Selection pop up to select a specific plan.

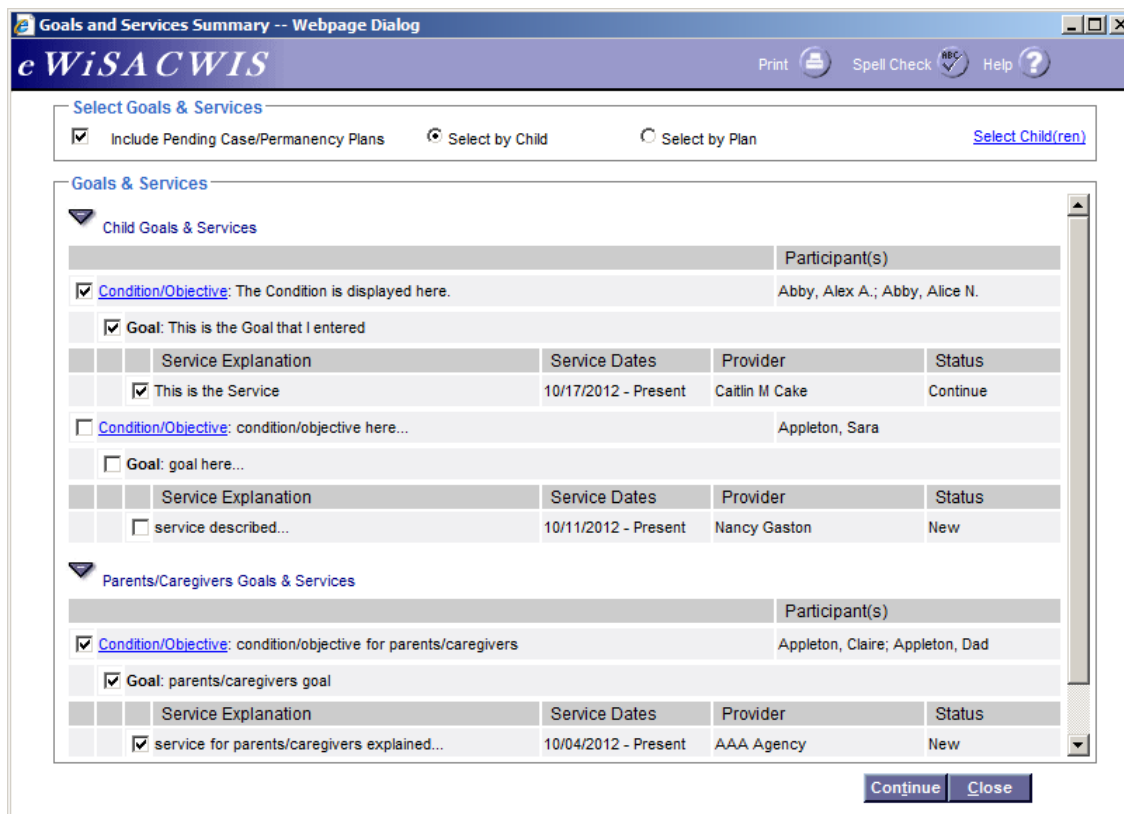


The screenshot shows a 'Plan Selection -- Webpage Dialog' window. At the top is the 'eWiSACWIS' logo and navigation buttons: Print, Spell Check, and Help. Below the header is a section titled 'Plan(s)' containing a table with columns: 'Select All', 'Plan Date', 'Plan Type', 'Status', and 'Child(ren)'. There are four rows of data, each with a checkbox in the 'Select All' column. At the bottom right are 'Continue' and 'Close' buttons.

<input type="checkbox"/> Select All	Plan Date	Plan Type	Status	Child(ren)
<input type="checkbox"/>	10/03/2012	Case Plan	Ongoing	Appleton, Rae
<input type="checkbox"/>	10/04/2012	Case Plan	Not Approved	Appleton, Nelly
<input type="checkbox"/>	10/04/2012	Permanency Plan	Historical	Appleton, Sara
<input type="checkbox"/>	10/04/2012	Permanency Plan	Ongoing	Appleton, Sara

48. The Goals & Services group box is used to select the Condition/Objective, Goals and Services that will be copied over. Check the box next to all that apply. Click Continue to return to the Case/Permanency Plan page, the selected Conditions/Objectives, Goals and Services will appear under the corresponding Goals & Services Section.

**Note:** Checking the box for a Service will automatically check the box for the associated Goal and Condition/Objective.



The screenshot shows a 'Goals and Services Summary -- Webpage Dialog' window. It has the same header as the previous dialog. Below the header, there are radio buttons for 'Select by Child' (selected) and 'Select by Plan', along with a 'Select Child(ren)' link. The main section is titled 'Goals & Services' and contains two expandable sections: 'Child Goals & Services' and 'Parents/Caregivers Goals & Services'. Each section has a 'Condition/Objective' checkbox, a 'Goal' checkbox, and a table of services with columns: 'Service Explanation', 'Service Dates', 'Provider', and 'Status'. At the bottom right are 'Continue' and 'Close' buttons.

**Child Goals & Services**

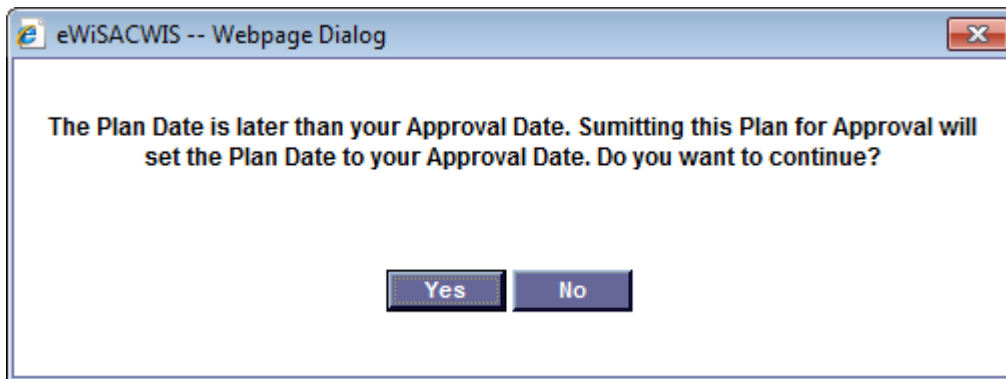
Participant(s)								
<input checked="" type="checkbox"/> Condition/Objective: The Condition is displayed here. Abby, Alex A.; Abby, Alice N.								
<input checked="" type="checkbox"/> Goal: This is the Goal that I entered								
<table border="1"> <thead> <tr> <th>Service Explanation</th> <th>Service Dates</th> <th>Provider</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> This is the Service</td> <td>10/17/2012 - Present</td> <td>Caitlin M Cake</td> <td>Continue</td> </tr> </tbody> </table>	Service Explanation	Service Dates	Provider	Status	<input checked="" type="checkbox"/> This is the Service	10/17/2012 - Present	Caitlin M Cake	Continue
Service Explanation	Service Dates	Provider	Status					
<input checked="" type="checkbox"/> This is the Service	10/17/2012 - Present	Caitlin M Cake	Continue					
<input type="checkbox"/> Condition/Objective: condition/objective here... Appleton, Sara								
<input type="checkbox"/> Goal: goal here...								
<table border="1"> <thead> <tr> <th>Service Explanation</th> <th>Service Dates</th> <th>Provider</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> service described...</td> <td>10/11/2012 - Present</td> <td>Nancy Gaston</td> <td>New</td> </tr> </tbody> </table>	Service Explanation	Service Dates	Provider	Status	<input type="checkbox"/> service described...	10/11/2012 - Present	Nancy Gaston	New
Service Explanation	Service Dates	Provider	Status					
<input type="checkbox"/> service described...	10/11/2012 - Present	Nancy Gaston	New					

**Parents/Caregivers Goals & Services**

Participant(s)								
<input checked="" type="checkbox"/> Condition/Objective: condition/objective for parents/caregivers Appleton, Claire; Appleton, Dad								
<input checked="" type="checkbox"/> Goal: parents/caregivers goal								
<table border="1"> <thead> <tr> <th>Service Explanation</th> <th>Service Dates</th> <th>Provider</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> service for parents/caregivers explained...</td> <td>10/04/2012 - Present</td> <td>AAA Agency</td> <td>New</td> </tr> </tbody> </table>	Service Explanation	Service Dates	Provider	Status	<input checked="" type="checkbox"/> service for parents/caregivers explained...	10/04/2012 - Present	AAA Agency	New
Service Explanation	Service Dates	Provider	Status					
<input checked="" type="checkbox"/> service for parents/caregivers explained...	10/04/2012 - Present	AAA Agency	New					

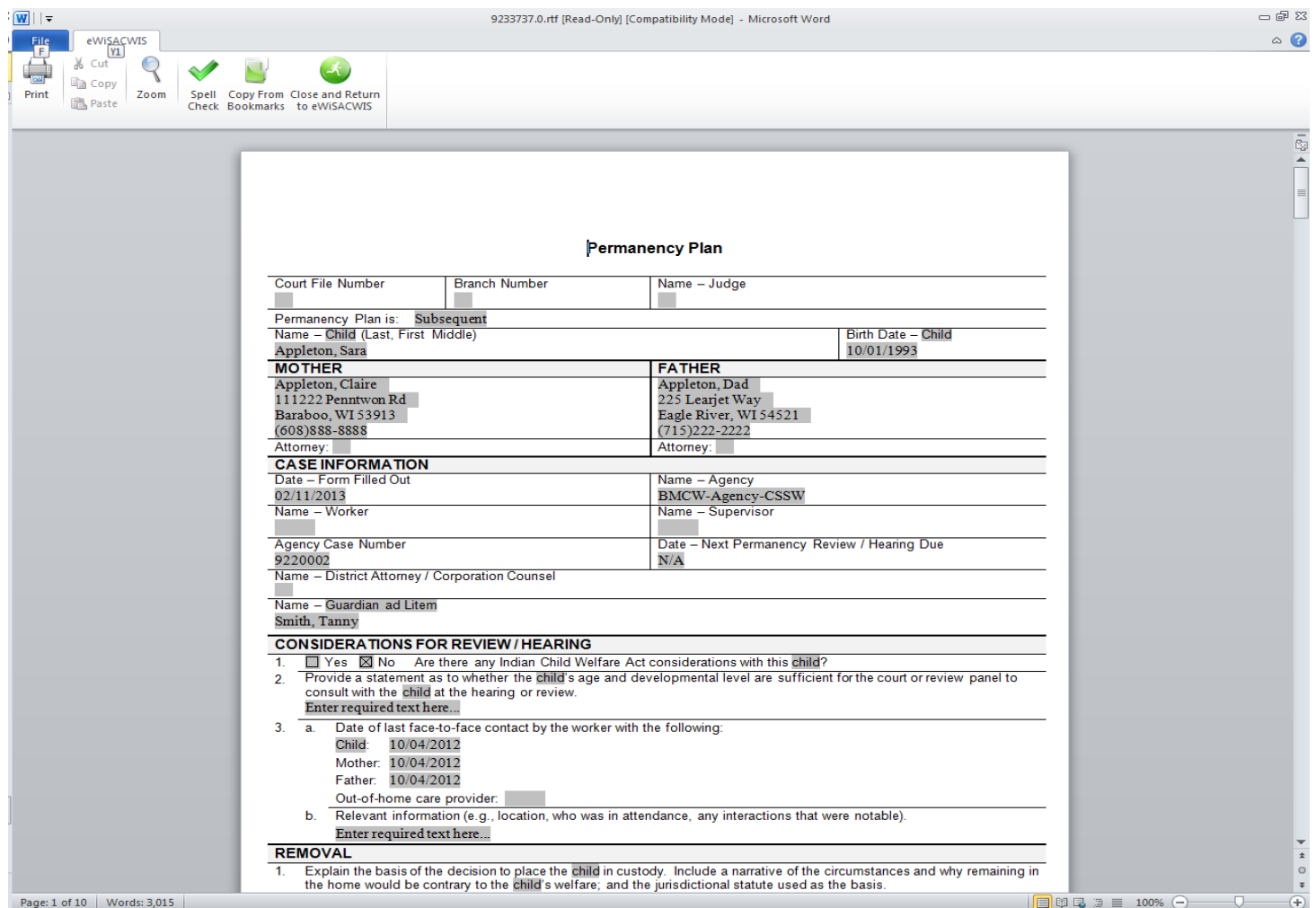
49. From the Options drop-down (on any of the tabs), you can approve the plan. Select Approval and click Go. On the Approval History page, select the Approve radio button and click Continue. On the Case/Permanency Plan page, click Save.

If a future Plan Date was documented, you can update the Plan Date to today's date.



50. You can launch the Permanency Plan template from any tab of the plan. Select Permanency Plan and click Go.

**Note:** The worker and supervisors names will not pre-fill to the template until after approval. The template should be printed after approval.



**Permanency Plan**

Court File Number	Branch Number	Name - Judge
Permanency Plan is: <b>Subsequent</b>		
Name - Child (Last, First Middle)		Birth Date - Child
Appleton, Sara		10/01/1993
<b>MOTHER</b>		<b>FATHER</b>
Appleton, Claire 111222 Penntwon Rd Baraboo, WI 53913 (608)888-8888		Appleton, Dad 225 Learjet Way Eagle River, WI 54521 (715)222-2222
Attorney:		Attorney:
<b>CASE INFORMATION</b>		
Date - Form Filled Out		Name - Agency
02/11/2013		BMCW-Agency-CSSW
Name - Worker		Name - Supervisor
Agency Case Number		Date - Next Permanency Review / Hearing Due
9220002		N/A
Name - District Attorney / Corporation Counsel		
Name - Guardian ad Litem		
Smith, Tanny		
<b>CONSIDERATIONS FOR REVIEW / HEARING</b>		
1. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any Indian Child Welfare Act considerations with this child?		
2. Provide a statement as to whether the child's age and developmental level are sufficient for the court or review panel to consult with the child at the hearing or review. Enter required text here...		
3. a. Date of last face-to-face contact by the worker with the following: Child: 10/04/2012 Mother: 10/04/2012 Father: 10/04/2012 Out-of-home care provider: b. Relevant information (e.g., location, who was in attendance, any interactions that were notable). Enter required text here...		
<b>REMOVAL</b>		
1. Explain the basis of the decision to place the child in custody. Include a narrative of the circumstances and why remaining in the home would be contrary to the child's welfare; and the jurisdictional statute used as the basis.		

51. You can launch the History of Planning and Services template from any tab of the plan. This template contains the full history of Goals & Services that have been documented for the child(ren) on this plan (it does not print the selected period if the Display History check box is selected). Select History of Planning and Services and click Go.

**History of Planning and Services**

Name – Child (Last, First Middle) Appleton, Sara Birth Date – Child 10/01/1993

Name – Mother Appleton, Claire Name – Father Appleton, Dad

**CURRENT PLANNING AND SERVICES**

Child: Appleton, Sara

Condition / Objective: condition/objective here...

Goal: goal here...

Service category: Respite

Specifically explain service: service described...

Responsible person / provider: Nancy Gaston

Frequency / Duration: 3 Hours per Week

Begin date: 10/11/2012 End date:

Describe progress: description of progress

Status of service: New: New service will begin in the next six months: new service will be beginning...

Parent / Caregiver: Appleton, Claire; Appleton, Dad

Condition / Objective: condition/objective for parents/caregivers

Goal: parents/caregivers goal

Service category: AODA Treatment

Specifically explain service: service for parents/caregivers explained...

Responsible person / provider: AAA Agency

Frequency / Duration: 10 Hours per Week

Begin date: 10/04/2012 End date:

Describe progress: progress...

Status of service: New: New service will begin in the next six months: new service for parents/caregivers

Family Condition / Objective:

Goal:

Service category:

Specifically explain service:

Responsible person / provider:

Frequency / Duration:

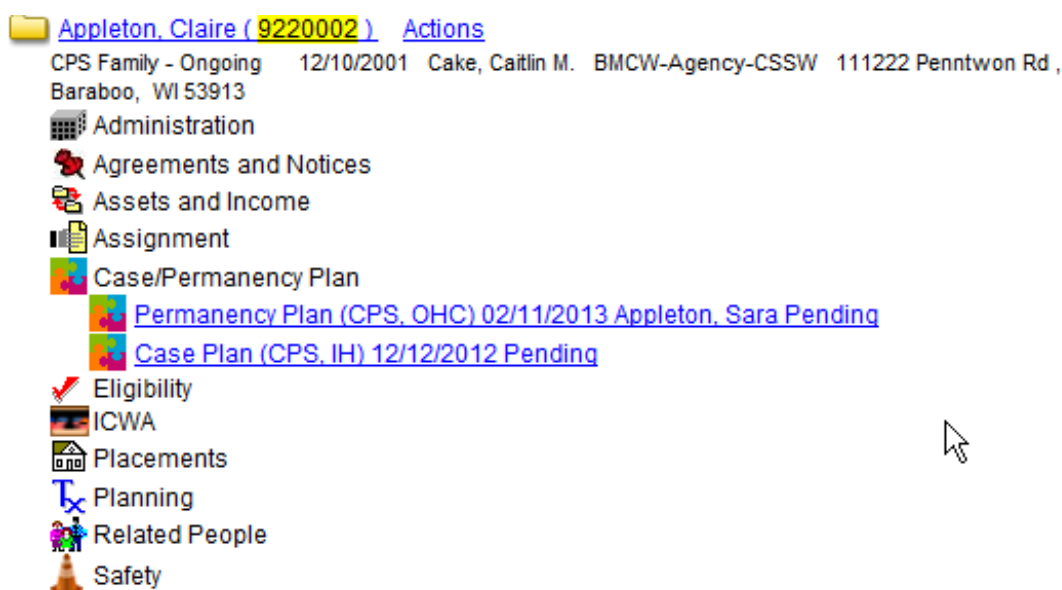
Begin date:  End date:

Describe progress:

Status of service:

**HISTORICAL PLANNING AND SERVICES**

52. The Permanency Plan will appear on the desktop under the Case/Permanency Plan icon. Click the Permanency Plan icon to see all of the related work associated to that Permanency Plan (a link to the associated review or hearing displays to the left)



53. An option to revise a Perm Plan is available if revisions were ordered at the Hearing/Review. The revise option will only be available if; the review is a judicial review or a panel review with one of the recommendations selected as 'Yes', and the review must be within 30 days of the plan date.

On a revised plan the Permanence Goals on the Permanency tab and the Goals and Services on the Planning & Services tab can be edited. Everything else copies over exactly from the plan that the revise option was launched from.

To revise a plan select 'Revise' from the options drop down on the plan to be revised.

Case / Permanency Plan - Internet Explorer

**eWiSACWIS** TM Print Spell Check Help

**Basic**

Child Name: [Appleton, Sara \(9226178\)](#) Birth Date: 10/01/1993 Plan Date: 10/04/2013 [Details](#)

Case Name: [Appleton, Claire \(9220002\)](#) Plan Is: Subsequent

Person Type: CPS, CW Plan Type: CPS, OHC, IL Next Permanency Review /Hearing Due: n/a

Case Notes: [Safety](#) [Case/Permanency Planning](#) [Well-being](#) [Case Note Search](#)

**Basic** Considerations for Review/Hearing Removal Placement Permanency Well-Being Safety Planning & Services

**Court Information**

Court File Number(s) Branch Judge [Legal Record](#)

Not Applicable

[Add/Edit](#)

**Parent Info**

Mother: [Appleton, Claire](#) Father: [Appleton, Dad](#)

Display: ☒ Address: 111222 Penntw on Rd Baraboo, WI 53913 Display: ☒ Address: 225 Learjet Way Eagle River, WI 54521

Phone: (608)888-8888 Phone: (715)222-2222

Cell Phone: Cell Phone:

Mother's Attorney: Father's Attorney:

**Collaterals**

Public Defender / Attorney for Child:

Options: [Actions](#) [Approval](#) **[Revise](#)** [Terminate](#) [Text](#) [Go](#) [Save](#) [Close](#)

125%